

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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Prefix

OMB APPRO	DVAL
OMB Number:	3235-0076
Expires April 30, 2008	
Estimated average burden	
hours per response 16.00	

SEC USE ONLY

DATE RECEIVED

Serial

Name of Offering (check if th	is is an amendment and name has changed, and indicate change.)
The Concorde Group, Inc Priva	apply): Rule 504 Rule 505 Rule 506 Section 4(6) J. Section 4(6)
	A. BASIC IDENTIFICATION DATA
Enter the information reques	1741
1. Enter the information reque	196 Cili
Name of Issuer () check if this	is an amendment and name has changed, and indicate change.)
The Concorde Group, Inc.	
Address of Executive Offices	(Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
14 Wall Street, New York, New Y	York 10005 212-566-8300
Address of Principal Business Operations	(Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
(if different from Executive Office	<u>cs)</u>
Brief Description of Business Financial Services Company	
Type of Business Organization	
orporation	☐ limited partnership, already formed ☐ other (please specify): Limited Liability
business trust	[] limited partnership to be formed Company
Actual or Estimated Date of Inco	
Actual of Estimated Date of theo	
	0 1 9 5 MAY 3 0 200
Jurisdiction of Incorporation or C	THOMSON FINANCIAL
	CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS	
F :)	offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 u.s.c. 77d(6).
When To File: A notice must be filed to Commission (SEC) on the earlier of the mailed by United States registered or the	no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange he date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was certified mail to that address.
·	change Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
	is notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the
manually signed copy or bear typed or	printed signatures.
Information Required; A new filing m requested in Part C, and any material	oust contain all information required, Amendments need only report the name of the issuer and offering, any changes thereto, the information changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing t	ee.
State:	
This notice shall be used to indicate readopted this form. Issuers relying on payment of a fee as a precondition to	cliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state require the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in additional to the notice constitutes a part of this notice and must be completed.
SEC 1972 Potential person (6-02) Form displays	ons who are to respond to the collection of information contained in this form are not required to respond unless the a currently valid OMB control number

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			IDENTIFICATION D	ATA	
2. Enter the informa	<u>-</u>	_	_		
 Each beneficial o issuer; 	wner having the		or direct the vote or disp	osition of, 10%	or more of a class of equity securities of the
		or of corporate issuers and er of partnership issuers.	of corporate general and	i managing paru	ners of partnership issuers; and
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Member of General Managing Partner Partner
Full Name (Last name first, Zabala, Craig A.					
Business or Residence Addre 14 Wall Street, New York, N			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Member of General Managing Partner Partner
Full Name (Last name first, Owens, Robert J.			-		
Business or Residence Address 14 Wall Street, New York, N			Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Member of General Managing Partner Partner
Full Name (Last name first, Fujii, Robert M.					
Business or Residence Address 14 Wall Street, New York, N			Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Member of General Managing Partner Partner
Full Name (Last name first, Baumann, Kurt					
Business or Residence Address		=	Code)		
14 Wall Street, New York, N Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Member of General
Full Name (Last name first,	if individual)			· · · · · · · · · · · · · · · · · · ·	Managing Partner Partner
Business or Residence Addr	ess (Number and	d Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				tvialiagnig i actici
Business or Residence Addr	ess (Number and	1 Street, City, State, Zip (Code)	· · · · · · ·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,					
Business or Residence Addr	ess (Number and	· <u> </u>	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	d Street, City, State, Zip (Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	d Street, City, State, Zip C	Code)		
	(Use blank	sheet, or copy and us	se additional conies	of this sheet	as necessary.)
	nimio voo,		or additional vopios		

						В.	INFORMA	ATION OF	FERING			·	
1.	Has the	e issuer s	old, or doe	s the issuer	intend to s					g?			Yes No □ ⊠
2.	What is	s the min	imum inve	stment that	Ans: will be acc				if filing und	der ULOE.			N/A
3.	Does th	he offerir	ng permit jo	oint owners	hip of a sin	gle unit?			····			••••••••	Yes No .⊠ □
4.													
Full	Name (Last nam	e first, if in	idividual)									
Bus	iness or	Residenc	e Address	(Number a	nd Street, C	ity, State, 2	Zip Code)		,				
Nan	Name of Associated Broker or Dealer												
					d or Intenda				*****************			*************	All States
[AL [IL] [M] [R]	[] [] [] []	AK] IN] NE] SC] Last nam	[AZ [IA] [NV] [SD] te first, if ir	[AR] (KS) (NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Bus	iness or	Residenc	e Address	(Number a	nd Street, C	City, State, 2	Zip Code)						
			Broker or I										
					d or Intendates)								□ All States
(AL (IL) [M]	, (1 r) (1	AK] IN] NE] SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI) [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount 1. already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Sold Offering Price Debt 000,008 691,467,86 Equity..... Convertible Securities (including warrants) Partnership Interests Other (Specify) Total Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities 2. in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases 19 691,467,86 Accredited Investors Non-accredited Investors..... Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all 3. securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Type of Dollar Amount Type of offering Sold Security Rule 505..... Regulation A Rule 504..... Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs..... Legal Fees Accounting Fees..... Engineering Fees Sales Commissions (specify finders' fees separately).....

	C OFFFRING PRICE N	UMBER OF INVESTORS,	EXPENSES	AND USE OF P	ROCEEDS
	b. Enter the difference between the ag - Question 1 and total expenses furnish difference is the "adjusted gross procee	gregate offering price given in responded in response to Part C - Question 4	nse to part C I.a. This		\$ 691,467.86
5.	Indicate below the amount of the adjus to be used for each of the purposes sho furnish an estimate and check the box t payments listed must equal the adjusted to Part C – Question 4.b above.	ted gross proceeds to the issuer used wn. If the amount for any purpose is to the left of the estimate. The total of	or proposed not known, of the		
				Payments to Officers, Directors & Affiliates	Payments to Others
	Salaries and Fees			□ s	
	Purchase of real estate				□ \$
	Purchase, rental or leasing and installat	ion of machinery and equipment		5 \$	\$
	Construction or leasing of plant buildir	gs and facilities		\$	□ \$
	Acquisition of other businesses (includ offering that may be used in exchange pursuant to a merger)	for the assets or securities of another	issuer	□ \$	<u> </u>
	Repayment of Indebtedness			\$	s
- "	Working capital			\$	№ \$ 691,467,86
	Other (specify)	***************************************		S	S
	Column Totals	****		□ s	
	Total Payments Listed (column totals a	dded)		☒ \$ 69	1,467.86
		D. FEDERAL SIGNA	TURE		-
under Excha	suer has duly caused this notice rule 505, the following signatur- nge Commission, upon written i or pursuant to paragraph (b)(2) o	e constitutes an undertaking be request of its staff, the inform	y the issuer to	furnish to the U.	S. Securities and
Issuer	(Print or Type)	Signature	1/	Date	
The C	oncorde Group, Inc.	trungh sal	ially	April 30, 2007	
Name	of Signer (Print or Type)	Title of Signer (Print or Ty	/pe)		
Craig	A. Zabala	President and Chief Execu	tive Officer		
		ATTENTION			
	Intentional misstatements	or omissions of fact constitute federa	u criminal violatio	ons. (See 18 U.S.C. 1	001.)

		E. STATE SIGNATURE		
1,		0.262 presently subject to any of the disqualification	Yes	No
		See Appendix, Column 5, for state response.		
2.	(17 CFR 239,500) at such times as re			
3.	offerees.	takes to furnish to the state administrators, upon written request, information furn		
4.	Offering Exemption (ULOE) of the	at the issuer is familiar with the conditions that must be satisfied to be entitled to state in which this notice is filed and understands that the issuer claiming the avai hing that these conditions have been satisfied.		
	r has read this notification and knows t ed duly authorized person.	he contents to be true and has duly caused this notice to be signed on its behalf b	y the	
	int or Type)	Signature Date		
The Conc	orde Group, Inc.	May (h, Salvay April 30, 2007		
Name (Pr	int or Type)	Title (Print or Type)		
Craig A. Z	Zabala	President and Chief Executive Officer		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend (non acc inventors (Part C	to sell to credited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					fication State (if yes, ach ation of granted) — Item Not cable
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ ·									
AR									
CA		X	\$327,471.86	7	\$327,471.86				
СО		X	\$50,001	1	\$50,001				<u> </u>
СТ		Х	\$60,004	2	\$60,004				
DE			.						
DC							<u> </u>		
FL									
GA									<u> </u>
HI									
ID									
IL							ļ	ļ	<u> </u>
IN							ļ	<u> </u>	<u> </u>
IA							<u> </u>		<u> </u>
KS						=			<u> </u>
KY	ļ								<u> </u>
LA	ļ			· · · · · · · · · · · · · · · · · · ·					<u> </u>
ME									ļ
MD	ļ								<u> </u>
MA									<u> </u>
MI									ļ
MN									<u> </u>
MS								<u> </u>	ļ
МО					<u> </u>				

APPENDIX

i	<u> </u>	2	3	·· ·····	4					
	non acc	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1) Not Applicable	
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
MT									1.0	
NE		Х	\$157,000	4	\$157,000	·				
NV										
NH										
NJ										
NM	· · · · · · · · · · · · · · · · · · ·									
NY		X	\$82,000	3	\$82,000					
NC										
ND										
ОН	1									
OK										
OR										
PA		X	\$ 4,000	1	\$4,000					
RI										
SC									<u> </u>	
SD										
TN	_									
TX	<u> </u>								<u> </u>	
UT										
VT										
VA					611.000				ļ	
WA		Х	\$11,000	I	\$11,000					
WV	<u> </u>									
WI	 									
WY	ļ								<u> </u>	
PR								<u> </u>		

END